

ARIZONA STATE BOARD OF HEALTH
BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTH

State File No. 428
Registered No. _____

1. PLACE OF BIRTH

County Navajo State Ariz
District or Township _____ or Village Snowflake
City _____ No. _____ St. _____ Ward _____

2. Full name of child Ira Lamar Hillis (If birth occurred in a hospital or institution, give its NAME instead of street and number)
(If child is not yet named, make supplemental report, as directed.)

3. Sex of Child M To be answered ONLY in event of plural births. 4. Twin, triplet or other. _____ 6. Legitimate? Yes 7. Date of birth Nov 30, 1927
Month Day Year

8. FATHER
Full name Jernal L. Hillis

9. Residence (Usual place of abode) Snowflake
If non-resident, give place and state.

10. Color or race H 11. Age at last birthday 31 (Years)

12. Birthplace (city or place) Snowflake
(State or country) Ariz.

13. Occupation Farmer
Nature of Industry

14. MOTHER
Full maiden name Dora Pearl Hunt

15. Residence (Usual place of abode) Snowflake
If non-resident, give place and state.

16. Color or race H 17. Age at last birthday 30 (Years)

18. Birthplace (city or place) Pine
(State or country) Ariz.

19. Occupation Housewife
Nature of Industry

20. Number of children of this mother 4
(Taken as of time of birth of child herein certified and including this child.) (a) Born alive and now living 4
(b) Born alive but now dead 0
(c) Stillborn _____ 21. Were precautions taken against ophthalmia neonatorum? Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE*

I hereby certify that I attended the birth of this child, who was alive at 3:10 a. m. on the date above stated
(Born alive or stillborn.)

* When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth.

Signature J. H. Raywood
(Physician or midwife).

Given name added from a supplemental report _____ Address Snowflake

Month, day, year _____

Filed Nov 14, 1927 J. H. Frost,
Registrar

9-1136-483

WHEN PLAINLY WRITTEN IN INK—THIS IS SEPARATE RETURN must be made for each, and the number of each in order of birth stated.

affidavit attached